

**Fill in this information to identify your case and this filing:**

Debtor 1	<b>Mary E. Brown-Lee</b>	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF WISCONSIN</b>		
Case number <b>19-28702</b>		<input type="checkbox"/> Check if this is an amended filing

**Official Form 106A/B**  
**Schedule A/B: Property**

**12/15**

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**

**1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

No. Go to Part 2.

Yes. Where is the property?

1.1

**3909 N. 11th St.**

Street address, if available, or other description

**Milwaukee**      **WI**      **53206-0000**

City                          State                          ZIP Code

**Milwaukee**

County

**What is the property? Check all that apply**

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?**

**\$11,000.00**

**Current value of the portion you own?**

**\$11,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Fee simple**

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

**Milwaukee County 2019 assessed value \$38,900; Based on her knowledge of the condition of the property and the market conditions of her neighborhood, the Debtor believes that this value is overstated and that the actual fair market value of the property is \$11,000.**

**If you own or have more than one, list here:**

1.2

**3879 N. 6th St.**

Street address, if available, or other description

**Milwaukee**      WI      **53212-0000**

City                    State                    ZIP Code

**What is the property? Check all that apply**

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?**

**\$8,000.00**

**Current value of the portion you own?**

**\$8,000.00**

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

**Fee simple**

**Check if this is community property (see instructions)**

**Who has an interest in the property? Check one**

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another \_\_\_\_\_

**Other information you wish to add about this item, such as local property identification number:**

**Milwaukee County 2019 assessed value \$35,100; Based on her knowledge of the condition of the property and the market conditions of her neighborhood, the Debtor believes that this value is overstated and that the actual fair market value of the property is \$8,000.**

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

**\$19,000.00****Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.**

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- No
- Yes

3.1 Make:

**Subaru**Model: **2007**Year: **2007**

Approximate mileage: \_\_\_\_\_

Other Information: \_\_\_\_\_

**Who has an interest in the property? Check one**

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?**

**\$1,000.00**

**Current value of the portion you own?**

**\$1,000.00****4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

**Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories**

- No
- Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

**\$1,000.00****Part 3: Describe Your Personal and Household Items**

**Do you own or have any legal or equitable interest in any of the following items?**

Do not deduct secured  
claims or exemptions

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

 No Yes. Describe.....

**Beds, Dressers, Table, Lamps, Sofa, Loveseat, End tables,  
Cabinet, Dining table w/ chairs, China, Kitchen table w/ chairs,  
Stove, Refrigerator, Freezer, Cookware/utensils, Dishes,  
Lawnmower, Charcoal/gas grill**

**\$2,580.00**

**Washer, Dryer**

**\$600.00**

**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

 No Yes. Describe.....

**TV's, Video game system & games, DVD player, Blu Ray player,  
Stereo/Surround sound, Computer, Printer, Cell phones**

**\$1,610.00**

**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

 No Yes. Describe.....

**Pictures, knick-knacks**

**\$100.00**

**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

 No Yes. Describe.....

**Bike**

**\$50.00**

**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

 No Yes. Describe.....**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

 No Yes. Describe.....

**Used Clothing & Shoes**

**\$200.00**

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

 No Yes. Describe.....

**Costume/Fine Jewelry/Wedding Ring**

**\$200.00**

**13. Non-farm animals***Examples:* Dogs, cats, birds, horses

- No  
 Yes. Describe.....

**14. Any other personal and household items you did not already list, including any health aids you did not list**

- No  
 Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....**

\$5,340.00

**Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?  
Do not deduct secured claims or exemptions**

**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- No  
 Yes.....

**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

17.1.	<b>Direct Express Debit Card (Social Security Benefits)</b>	<b>\$0.00</b>
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17.2.	<b>Green Dot Debit Card</b>	<b>\$0.00</b>
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17.3.	<b>Netspend Debit Card</b>	<b>\$0.00</b>
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17.4. Checking	<b>Associated Bank</b>	<b>\$0.00</b>
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**18. Bonds, mutual funds, or publicly traded stocks***Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....

Institution or issuer name:

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture** No Yes. Give specific information about them.....

Name of entity:

% of ownership:

**20. Government and corporate bonds and other negotiable and non-negotiable instruments***Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them

Issuer name:

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately.

Type of account:

Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes.....

Institution name or individual:

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)**

No

Yes..... Issuer name and description.

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No

Yes. Give specific information about them...

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them...

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them...

**Money or property owed to you?**

**Current value of the portion you own?  
Do not deduct secured claims or exemptions.**

**28. Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information.....

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information..

<b>Social Security benefits payable @ \$825/month</b>	<b>\$825.00</b>
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**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund

value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information..**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim.....**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim.....**35. Any financial assets you did not already list** No Yes. Give specific information..**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here .....****\$825.00****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.****46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?** No. Go to Part 7. Yes. Go to line 47.**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

 No Yes. Give specific information.....**54. Add the dollar value of all of your entries from Part 7. Write that number here .....****\$0.00**

**Part 8:** List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 .....		\$19,000.00
56. Part 2: Total vehicles, line 5		\$1,000.00
57. Part 3: Total personal and household items, line 15		\$5,340.00
58. Part 4: Total financial assets, line 36		\$825.00
59. Part 5: Total business-related property, line 45		\$0.00
60. Part 6: Total farm- and fishing-related property, line 52		\$0.00
61. Part 7: Total other property not listed, line 54	+	\$0.00
62. Total personal property. Add lines 56 through 61...		<b>\$7,165.00</b> Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62		<b>\$26,165.00</b>

**Fill in this information to identify your case:**

Debtor 1	Mary E. Brown-Lee		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		EASTERN DISTRICT OF WISCONSIN	
Case number (if known)	19-28702		

Check if this is an amended filing

**Official Form 106C**

**Schedule C: The Property You Claim as Exempt**

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
3909 N. 11th St. Milwaukee, WI 53206 Milwaukee County Milwaukee County 2019 assessed value \$38,900; Based on her knowledge of the condition of the property and the market conditions of her neighborhood, the Debtor believes that this value is overstated an Line from <i>Schedule A/B</i> : 1.1	\$11,000.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)
3879 N. 6th St. Milwaukee, WI 53212 Milwaukee County Milwaukee County 2019 assessed value \$35,100; Based on her knowledge of the condition of the property and the market conditions of her neighborhood, the Debtor believes that this value is overstated an Line from <i>Schedule A/B</i> : 1.2	\$8,000.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
2007 Subaru Line from <i>Schedule A/B</i> : 3.1	\$1,000.00	<input checked="" type="checkbox"/> \$4,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
<b>Beds, Dressers, Table, Lamps, Sofa, Loveseat, End tables, Cabinet, Dining table w/ chairs, China, Kitchen table w/ chairs, Stove, Refrigerator, Freezer, Cookware/utensils, Dishes, Lawnmower, Charcoal/gas grill</b> Line from Schedule A/B: 6.1	\$2,580.00	<input checked="" type="checkbox"/> \$2,580.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
<b>TV's, Video game system &amp; games, DVD player, Blu Ray player, Stereo/Surround sound, Computer, Printer, Cell phones</b> Line from Schedule A/B: 7.1	\$1,610.00	<input checked="" type="checkbox"/> \$1,610.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
<b>Pictures, knick-knacks</b> Line from Schedule A/B: 8.1	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
<b>Bike</b> Line from Schedule A/B: 9.1	\$50.00	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
<b>Used Clothing &amp; Shoes</b> Line from Schedule A/B: 11.1	\$200.00	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
<b>Costume/Fine Jewelry/Wedding Ring</b> Line from Schedule A/B: 12.1	\$200.00	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(4)</b>
<b>Direct Express Debit Card (Social Security Benefits)</b> Line from Schedule A/B: 17.1	\$0.00	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(10)(A)</b>
<b>Checking: Associated Bank</b> Line from Schedule A/B: 17.4	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
<b>Social Security benefits payable @ \$825/month</b> Line from Schedule A/B: 30.1	\$825.00	<input checked="" type="checkbox"/> \$823.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(10)(A)</b>

## 3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

 No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Fill in this information to identify your case:

Debtor 1	Mary E. Brown-Lee		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: EASTERN DISTRICT OF WISCONSIN			
Case number (if known)	19-28702		

Check if this is an amended filing

Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1 City of Milwaukee

Creditor's Name

Describe the property that secures the claim:

3879 N. 6th St. Milwaukee, WI 53212  
Milwaukee County  
Milwaukee County 2019 assessed value \$35,100; Based on her knowledge of the condition of the property and the market conditions of her neighborhood, the Debtor believes that this value

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion if any
\$6,092.83	\$8,000.00	\$23.92

City Treasurer  
200 E. Wells Street  
Milwaukee, WI 53202

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates to a community debt

- As of the date you file, the claim is: Check all that apply.  
 Contingent  
 Unliquidated  
 Disputed
- Nature of lien. Check all that apply.
- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) **Real estate taxes**

Date debt was incurred **2016-2017**

Last 4 digits of account number

Debtor 1	<b>Mary E. Brown-Lee</b>	Case number (if known)	<b>19-28702</b>
First Name	Middle Name	Last Name	
<b>2.2 City of Milwaukee</b>		Describe the property that secures the claim:	
Creditor's Name		3879 N. 6th St. Milwaukee, WI 53212	\$1,931.09
Office of the City Attorney 200 E. Well Street - Suite 800 Milwaukee, WI 53202		Milwaukee County Milwaukee County 2019 assessed value \$35,100; Based on her knowledge of the condition of the property and the market conditions of her neighborhood, the Debtor believes that this value	\$8,000.00
Number, Street, City, State & Zip Code		As of the date you file, the claim is: Check all that apply.	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Who owes the debt? Check one.		Nature of lien. Check all that apply.	
<input checked="" type="checkbox"/> Debtor 1 only		<input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)	
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)	
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Judgment lien from a lawsuit	
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Other (including a right to offset)	<b>Real estate taxes (Pre-petition Interest, Penalties, and Costs)</b>
<input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred <b>2016-2017</b>		Last 4 digits of account number	
<b>2.3 City of Milwaukee</b>		Describe the property that secures the claim:	
Creditor's Name		3909 N. 11th St. Milwaukee, WI 53206 Milwaukee County	\$8,526.04
City Treasurer 200 E. Wells Street Milwaukee, WI 53202		Milwaukee County 2019 assessed value \$38,900; Based on her knowledge of the condition of the property and the market conditions of her neighborhood, the Debtor believes that this value	\$11,000.00
Number, Street, City, State & Zip Code		As of the date you file, the claim is: Check all that apply.	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Who owes the debt? Check one.		Nature of lien. Check all that apply.	
<input type="checkbox"/> Debtor 1 only		<input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)	
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)	
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Judgment lien from a lawsuit	
<input checked="" type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Other (including a right to offset)	<b>Real estate taxes</b>
<input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred <b>2015-2017</b>		Last 4 digits of account number	

Debtor 1 **Mary E. Brown-Lee**

First Name

Middle Name

Last Name

Case number (if known)

**19-28702**

**2.4 City of Milwaukee**  
Creditor's Name

Describe the property that secures the claim:  
**3909 N. 11th St. Milwaukee, WI  
53206 Milwaukee County  
Milwaukee County 2019 assessed  
value \$38,900; Based on her  
knowledge of the condition of the  
property and the market conditions  
of her neighborhood, the Debtor  
believes that this value**

**\$4,204.19****\$11,000.00****\$1,730.23**

**Office of the City  
Attorney  
200 E. Well Street - Suite  
800  
Milwaukee, WI 53202**

Number, Street, City, State &amp; Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

**Real estate taxes (Pre-petition Interest, Penalties, and Costs)**Date debt was incurred **2015-2017**

Last 4 digits of account number

**2.5 Get It Now, LLC**  
Creditor's Name

**Attn: Mitchell E. Fadel,  
CEO  
5501 Headquarters Dr  
Plano, TX 75024**

Number, Street, City, State &amp; Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Describe the property that secures the claim:

**\$2,058.00****\$600.00****\$1,458.00****Washer, Dryer**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- Nature of lien. Check all that apply.
- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

**Purchase Money Security****Opened****10/30/15****Last Active****6/04/16**

Last 4 digits of account number

**7896**

Date debt was incurred

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$22,812.15**

If this is the last page of your form, add the dollar value totals from all pages.

**\$22,812.15**

Write that number here:

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Debtor 1 **Mary E. Brown-Lee**  
First Name Middle Name Last Name

Case number (if known) **19-28702**

Name, Number, Street, City, State & Zip Code  
**Robert J. Hyndman, Esq.**  
**Law Office of Robert J. Hyndman**  
**12521 W. Hampton Ave.**  
**PO Box 624**  
**Butler, WI 53007**

On which line in Part 1 did you enter the creditor? 2.5

Last 4 digits of account number \_\_\_\_\_

**Fill in this information to identify your case:**

Debtor 1	<b>Mary E. Brown-Lee</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		EASTERN DISTRICT OF WISCONSIN	
Case number (if known)	<u>19-28702</u>		

Check if this is an amended filing

**Official Form 106E/F**

**Schedule E/F: Creditors Who Have Unsecured Claims**

**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	<b>Internal Revenue Service</b> Priority Creditor's Name <b>PO Box 7346</b> <b>Philadelphia, PA 19101-7346</b> Number Street City State Zip Code	Last 4 digits of account number	\$0.00	\$0.00
		When was the debt incurred?		
		As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Type of PRIORITY unsecured claim:			
	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify			
		<b>Notice Only</b>		

**2.2** **Wisconsin Department of Revenue**  
 Priority Creditor's Name  
**Special Procedures Unit**  
**PO Box 8901**  
**Madison, WI 53708-8901**  
 Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number                 \$0.00      \$0.00      \$0.00

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations
- Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated
- Other. Specify \_\_\_\_\_

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

3. Do any creditors have nonpriority unsecured claims against you?

 No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

\$751.00

**4.1** **ACL Laboratories**  
 Nonpriority Creditor's Name  
**PO Box 27901**  
**Milwaukee, WI 53227-0901**  
 Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number 3778When was the debt incurred? 2017

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Medical expense

4.2	<b>AT &amp; T</b> Nonpriority Creditor's Name <b>P.O. Box 5080</b> <b>Carol Stream, IL 60197-5080</b> Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number _____ When was the debt incurred? As of the date you file, the claim is: Check all that apply	\$0.00
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Notice Only</b>	
4.3	<b>Badger Mutual Insurance Co.</b> Nonpriority Creditor's Name <b>P.O. Box 2092</b> <b>Milwaukee, WI 53201</b> Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number _____ When was the debt incurred? <b>2006</b> As of the date you file, the claim is: Check all that apply	\$0.00
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <b>Milwaukee County Circuit Court Case No. 2006SC011508 - Debt was discharged; judgment has not been satisfied</b>	
4.4	<b>Berrada Properties Management Inc</b> Nonpriority Creditor's Name <b>7795 N. Pointe Street</b> <b>Milwaukee, WI 53224</b> Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number _____ When was the debt incurred? As of the date you file, the claim is: Check all that apply	\$700.00
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	

Debtor 1 Mary E. Brown-Lee

Case number (if known)

19-28702

<p><b>4.5</b></p> <p><b>Caine &amp; Weiner</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>Po Box 5010</b> <b>Woodland Hills, CA 91365</b> Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7892</u> <span style="float: right;">\$168.00</span></p> <p>When was the debt incurred? <u>Opened 5/02/13</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <u>01 Readyrefresh By Nestle</u></p>
<p><b>4.6</b></p> <p><b>Chase Bank</b> Nonpriority Creditor's Name <b>Bankruptcy Department</b> <b>P.O. Box 15298</b> <b>Wilmington, DE 19850</b> Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <span style="float: right;">\$200.00</span></p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <u>Overdrawn Account</u></p>
<p><b>4.7</b></p> <p><b>ChexSystems</b> Nonpriority Creditor's Name <b>Consumer Relations</b> <b>7805 Hudson Rd. Suite 100</b> <b>Woodbury, MN 55125</b> Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0428</u> <span style="float: right;">\$0.00</span></p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <u>Notice Only</u></p>

Debtor 1 Mary E. Brown-Lee

Case number (if known)

19-28702

4.8	<b>City of Milwaukee</b> Nonpriority Creditor's Name <b>PO Box 3268</b> <b>Milwaukee, WI 53201-3268</b> Number Street City State Zip Code	Last 4 digits of account number <u>2300</u>	\$2,380.15
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Water &amp; Wastewater Utilities</u>	
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.9	<b>City of Milwaukee</b> Nonpriority Creditor's Name <b>PO Box 3268</b> <b>Milwaukee, WI 53201-3268</b> Number Street City State Zip Code	Last 4 digits of account number <u>4300</u>	\$1,303.00
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Water &amp; Wastewater Utilities</u>	
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.10	<b>Credit Acceptance Corp</b> Nonpriority Creditor's Name <b>25505 West Twelve Mile Rd</b> <b>Southfield, MI 48034</b> Number Street City State Zip Code	Last 4 digits of account number	\$17,467.46
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Repossessed Vehicle</u>	
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 **Mary E. Brown-Lee**

Case number (if known)

**19-28702**4.1  
1**Credit Collection Services**

Nonpriority Creditor's Name

**Attn: Bankruptcy  
725 Canton St  
Norwood, MA 02062**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**4684****\$99.00**

When was the debt incurred?

**Opened 1/31/14**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **06 Progressive**4.1  
2**CSM Billing Office**

Nonpriority Creditor's Name

**PO Box 451  
Milwaukee, WI 53201**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**8691****\$1,838.16**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Medical Expenses**4.1  
3**CSM Hospitals**

Nonpriority Creditor's Name

**7389 Solution Center  
Chicago, IL 60677-7003**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**8691****\$2,484.00**

When was the debt incurred?

**2018**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Medical Expenses**

Debtor 1 **Mary E. Brown-Lee**

Case number (if known)

**19-28702**4.1  
4**Enterprise Rent-a-Car**

Nonpriority Creditor's Name

**PO Box 801988****Kansas City, MO 64180-1988**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number **2138****\$0.00**When was the debt incurred? **2018**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Notice Only**4.1  
5**FedLoan Servicing**

Nonpriority Creditor's Name

**Attn: Bankruptcy****Po Box 69184****Harrisburg, PA 17106**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number **0004****\$6,000.00**When was the debt incurred? **05/18**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify \_\_\_\_\_**Educational**4.1  
6**FedLoan Servicing**

Nonpriority Creditor's Name

**Attn: Bankruptcy****Po Box 69184****Harrisburg, PA 17106**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number **0006****\$6,000.00**When was the debt incurred? **05/18**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify \_\_\_\_\_**Educational**

Debtor 1 **Mary E. Brown-Lee**

Case number (if known)

**19-28702**

4.1 7	<b>FedLoan Servicing</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>Po Box 69184</b> <b>Harrisburg, PA 17106</b> Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number <b>0005</b>  When was the debt incurred? <b>Opened 8/28/17 Last Active 05/18</b>  As of the date you file, the claim is: Check all that apply  <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,500.00
		Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
<b>Educational</b>			
4.1 8	<b>FedLoan Servicing</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>Po Box 69184</b> <b>Harrisburg, PA 17106</b> Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number <b>0003</b>  When was the debt incurred? <b>Opened 8/31/16 Last Active 05/18</b>  As of the date you file, the claim is: Check all that apply  <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,500.00
		Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
<b>Educational</b>			
4.1 9	<b>FedLoan Servicing</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>Po Box 69184</b> <b>Harrisburg, PA 17106</b> Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number <b>0002</b>  When was the debt incurred? <b>Opened 2/18/16 Last Active 05/18</b>  As of the date you file, the claim is: Check all that apply  <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,000.00
		Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
<b>Educational</b>			

4.2  
0**FedLoan Servicing**

Nonpriority Creditor's Name

**Attn: Bankruptcy  
Po Box 69184  
Harrisburg, PA 17106**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**0001****\$1,750.00**When was the debt incurred?  
**Opened 2/18/16 Last Active 05/18**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

**Educational**4.2  
1**Franklin Collection Service, Inc.**

Nonpriority Creditor's Name

**Attn: Bankruptcy  
Po Box 3910  
Tupelo, MS 38803**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**4899****\$753.00**When was the debt incurred?  
**Opened 3/19/18**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **10 AT&T**

4.2  
2**Gebhard Law Office LLC**

Nonpriority Creditor's Name

**8435 West Burleigh Street  
Milwaukee, WI 53222**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**\$0.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Notice Only**

4.2 3	<b>Kohn Law Firm SC</b> Nonpriority Creditor's Name <u>735 N. Water Street #1300</u> <u>Milwaukee, WI 53202</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes	Last 4 digits of account number <u>3017</u> When was the debt incurred? <u>2016</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collection for Milwaukee Board of School Directors</u>	<u>\$134.59</u>
4.2 4	<b>Milwaukee Municipal Court</b> Nonpriority Creditor's Name <u>951 North James Lovell Street</u> <u>Milwaukee, WI 53233-1449</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1978</u> When was the debt incurred? <u>2018</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Building Code Violations</u>	<u>\$3,900.00</u>
4.2 5	<b>Milwaukee Municipal Court</b> Nonpriority Creditor's Name <u>951 North James Lovell Street</u> <u>Milwaukee, WI 53233-1449</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1979</u> When was the debt incurred? <u>2018</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Building Code Violations</u>	<u>\$2,780.00</u>

Debtor 1 Mary E. Brown-Lee

Case number (if known)

19-287024.2  
6**Milwaukee Municipal Court**

Nonpriority Creditor's Name

**951 North James Lovell Street  
Milwaukee, WI 53233-1449**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number 9846,0106,4  
163

\$9,640.00

When was the debt incurred? 2015, 2017

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Building Code Violations4.2  
7**Monarch Recovery Management, Inc.**

Nonpriority Creditor's Name

**P.O. Box 986  
Bensalem, PA 19020**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number 8207

\$820.67

When was the debt incurred? 2018

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Collection for U.S. Bank4.2  
8**National Credit Adjusters, LLC**

Nonpriority Creditor's Name

**327 W 4th Ave.  
Po Box 3023  
Hutchinson, KS 67504**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number 8858

\$1,251.00

When was the debt incurred? Opened 3/18/16

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify 01 Check N Go

Debtor 1 Mary E. Brown-Lee

Case number (if known)

19-287024.2  
9**Orthopedic Surgeons of Wisconsin,  
S.C.**

Nonpriority Creditor's Name

**P.O. Box 78945  
Milwaukee, WI 53278-8945**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

0675

\$3.00

When was the debt incurred?

2018

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Medical Expenses4.3  
0**Professional Bureau of Collections  
of**

Nonpriority Creditor's Name

**Maryland, Inc.  
Attn: Bankruptcy  
5295 DTC Parkway  
Greenwood Village, CO 80111**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

7352

\$11,927.00

When was the debt incurred?

Opened 3/19/18

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify 14 Santander Consumer USA Inc4.3  
1**Rosen Dealership-Milwaukee**

Nonpriority Creditor's Name

**5505 S. 27th St.  
Milwaukee, WI 53221**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

\$7,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Rental Car

Debtor 1 Mary E. Brown-Lee

Case number (if known)

19-287024.3  
2**Seventh Avenue**

Nonpriority Creditor's Name

1112 7th AvenueMonroe, WI 53566

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt  
Is the claim subject to offset?  
 No  
 Yes

Last 4 digits of account number

57UP\$181.01

When was the debt incurred?

2017

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit card purchases

4.3  
3**Spectrum**

Nonpriority Creditor's Name

P.O. Box 2553Columbus, OH 43216-2553

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt  
Is the claim subject to offset?  
 No  
 Yes

Last 4 digits of account number

6608\$800.00

When was the debt incurred?

2018

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Cable Service

4.3  
4**Sprint**

Nonpriority Creditor's Name

Bankruptcy Dept.1310 Martin Luther King Dr.Bloomington, IL 61701

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt  
Is the claim subject to offset?  
 No  
 Yes

Last 4 digits of account number

\$1,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Phone service

4.3 5	<b>T-Mobile</b> Nonpriority Creditor's Name <b>T-Mobile Bankruptcy Team</b> <b>PO Box 53410</b> <b>Bellevue, WA 98015-3410</b> Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number _____	\$1,000.00
		When was the debt incurred?	
		As of the date you file, the claim is: Check all that apply	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify _____	
4.3 6	<b>US Bank</b> Nonpriority Creditor's Name <b>Bankruptcy Unit/CNDT0813</b> <b>950 17th Street #810</b> <b>Denver, CO 80202</b> Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number _____	\$200.00
		When was the debt incurred?	
		As of the date you file, the claim is: Check all that apply	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify <b>Overdrawn Account</b>	
4.3 7	<b>US Cellular</b> Nonpriority Creditor's Name <b>Attn: Write Off Department</b> <b>PO Box 7835</b> <b>Madison, WI 53707-7835</b> Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number <u>2247</u>	\$2,318.85
		When was the debt incurred? <u>2018</u>	
		As of the date you file, the claim is: Check all that apply	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify <b>Phone services</b>	

4.3 8	<b>WE Energies</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept. - A130</b> <b>PO Box 2046</b> <b>Milwaukee, WI 53201-2046</b> Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number	\$3,500.00
		When was the debt incurred?	
		As of the date you file, the claim is: Check all that apply	
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Utility Services</b>	

4.3 9	<b>Wells Fargo Bank</b> Nonpriority Creditor's Name <b>P.O. Box 6426</b> <b>Carol Stream, IL 60197</b> Number Street City State Zip Code Who incurred the debt? Check one.	Last 4 digits of account number	\$400.00
		When was the debt incurred?	
		As of the date you file, the claim is: Check all that apply	
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Overdrawn Account</b>	

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

**AT&T**  
**% Bankruptcy Dept.**  
**PO Box 769**  
**Arlington, TX 76004**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.21 of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address

**Daubert Law Firm LLC**  
**One Corporate Drive, Suite 400**  
**PO Box 1519**  
**Wausau, WI 54402-1519**

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address

**Dobberstein Law Firm LLC**  
**Meghan P. MacKelly**  
**225 South Executive Drive, Suite 201**  
**PO Box 410**  
**Brookfield, WI 53008-0410**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Louvenia Robinson**  
**P.O. Box 2092**  
**Milwaukee, WI 53201**

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.3 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Milwaukee Board of School Directors**  
**5225 W. Vliet St.**  
**Milwaukee, WI 53208**

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.23 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Santander Consumer USA**  
**Attn: Bankruptcy Department**  
**PO Box 560284**  
**Dallas, TX 75356-0284**

On which entry in Part 1 or Part 2 did you list the original creditor?  
Line 4.30 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1	6a. Domestic support obligations	6a. \$ <span style="border: 1px solid black; padding: 2px;"><b>0.00</b></span>	Total Claim
	6b. Taxes and certain other debts you owe the government	6b. \$ <span style="border: 1px solid black; padding: 2px;"><b>0.00</b></span>	
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ <span style="border: 1px solid black; padding: 2px;"><b>0.00</b></span>	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ <span style="border: 1px solid black; padding: 2px;"><b>0.00</b></span>	
	6e. Total Priority. Add lines 6a through 6d.	6e. \$ <span style="border: 1px solid black; padding: 2px;"><b>0.00</b></span>	
Total claims from Part 2	6f. Student loans	6f. \$ <span style="border: 1px solid black; padding: 2px;"><b>24,750.00</b></span>	Total Claim
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ <span style="border: 1px solid black; padding: 2px;"><b>0.00</b></span>	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ <span style="border: 1px solid black; padding: 2px;"><b>0.00</b></span>	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ <span style="border: 1px solid black; padding: 2px;"><b>74,999.89</b></span>	
	6j. Total Nonpriority. Add lines 6f through 6i.	6j. \$ <span style="border: 1px solid black; padding: 2px;"><b>99,749.89</b></span>	

**Fill in this information to identify your case:**

Debtor 1	<b>Mary E. Brown-Lee</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF WISCONSIN</b>			
Case number (if known)	<b>19-28702</b>		

Check if this is an amended filing

**Official Form 106G**

**Schedule G: Executory Contracts and Unexpired Leases**

**12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- No. Check this box and file this form with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

	<b>Person or company with whom you have the contract or lease</b> Name, Number, Street, City, State and ZIP Code		<b>State what the contract or lease is for</b>
2.1	Name		
	Number	Street	
	City	State	ZIP Code
2.2	Name		
	Number	Street	
	City	State	ZIP Code
2.3	Name		
	Number	Street	
	City	State	ZIP Code
2.4	Name		
	Number	Street	
	City	State	ZIP Code
2.5	Name		
	Number	Street	
	City	State	ZIP Code

**Fill in this information to identify your case:**

Debtor 1	<b>Mary E. Brown-Lee</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF WISCONSIN</b>			
Case number (If known)	<b>19-28702</b>		

Check if this is an amended filing

## Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- No  
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

- No  
 Yes.

In which community state or territory did you live?

**Wisconsin**. Fill in the name and current address of that person.

**Debtor separated from Mr. Lee in 2003**

**Edward Lee  
PO Box 05354  
Milwaukee, WI 53205**

Name of your spouse, former spouse, or legal equivalent  
Number, Street, City, State & Zip Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

**Column 1: Your codebtor**  
Name, Number, Street, City, State and ZIP Code

**Column 2: The creditor to whom you owe the debt**  
Check all schedules that apply:

3.1 **Lastarisia Ray  
3909 North 11th Street  
Milwaukee, WI 53206-3059**

- Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.10**  
 Schedule G \_\_\_\_\_  
**Credit Acceptance Corp**

Fill in this information to identify your case:

Debtor 1	Mary E. Brown-Lee
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: EASTERN DISTRICT OF WISCONSIN	
Case number (If known)	19-28702

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:  
MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Debtor 1

- Employed  
 Not employed

Debtor 2 or non-filing spouse

- Employed  
 Not employed

Occupation

Employer's name

Employer's address

How long employed there?

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1	For Debtor 2 or non-filing spouse
--------------	--------------------------------------

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  
3. Estimate and list monthly overtime pay.  
4. Calculate gross Income. Add line 2 + line 3.

2. \$ 0.00	\$ N/A
3. +\$ 0.00	+\$ N/A
4. \$ 0.00	\$ N/A

Copy line 4 here \_\_\_\_\_

For Debtor 1	For Debtor 2 or non-filing spouse
4. \$ <u>0.00</u>	\$ <u>N/A</u>

## 5. List all payroll deductions:

- 5a. Tax, Medicare, and Social Security deductions  
 5b. Mandatory contributions for retirement plans  
 5c. Voluntary contributions for retirement plans  
 5d. Required repayments of retirement fund loans  
 5e. Insurance  
 5f. Domestic support obligations  
 5g. Union dues  
 5h. Other deductions. Specify: \_\_\_\_\_

5a. \$ <u>0.00</u>	\$ <u>N/A</u>
5b. \$ <u>0.00</u>	\$ <u>N/A</u>
5c. \$ <u>0.00</u>	\$ <u>N/A</u>
5d. \$ <u>0.00</u>	\$ <u>N/A</u>
5e. \$ <u>0.00</u>	\$ <u>N/A</u>
5f. \$ <u>0.00</u>	\$ <u>N/A</u>
5g. \$ <u>0.00</u>	\$ <u>N/A</u>
5h. \$ <u>0.00</u>	+ \$ <u>N/A</u>

6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.

6. \$ 0.00 \$ N/A

7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

7. \$ 0.00 \$ N/A

## 8. List all other income regularly received:

- 8a. Net income from rental property and from operating a business,  
profession, or farm

Attach a statement for each property and business showing gross  
receipts, ordinary and necessary business expenses, and the total  
monthly net income.

8a. \$ 800.00 \$ N/A

- 8b. Interest and dividends

8b. \$ 0.00 \$ N/A

- 8c. Family support payments that you, a non-filing spouse, or a dependent  
regularly receive

Include alimony, spousal support, child support, maintenance, divorce  
settlement, and property settlement.

8c. \$ 0.00 \$ N/A

- 8d. Unemployment compensation

8d. \$ 0.00 \$ N/A

- 8e. Social Security

8e. \$ 825.00 \$ N/A

- 8f. Other government assistance that you regularly receive

Include cash assistance and the value (if known) of any non-cash assistance  
that you receive, such as food stamps (benefits under the Supplemental  
Nutrition Assistance Program) or housing subsidies.

Specify: **FoodShare**

8f. \$ 562.00 \$ N/A**Kinship**

- 8g. Pension or retirement income

8g. \$ 244.00 \$ N/A

- 8h. Other monthly income. Specify: \_\_\_\_\_

8h. + \$ 0.00 + \$ N/A

9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.

9. \$ 2,431.00 \$ N/A

10. Calculate monthly income. Add line 7 + line 9.

10. \$ 2,431.00 + \$ N/A = \$ 2,431.00

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

## 11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and  
other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  
Specify: \_\_\_\_\_

11. +\$ 0.00

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it  
applies

12. \$ 2,431.00

Combined  
monthly Income

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain: \* Line 8a - All expenses incurred in the collection of rent are listed on Schedule J.

Fill in this information to identify your case:

Debtor 1	<u>Mary E. Brown-Lee</u>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF WISCONSIN</u>
Case number (If known)	<u>19-28702</u>

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

##### 1. Is this a joint case?

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
     No  
     Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

##### 2. Do you have dependents? No

Do not list Debtor 1 and  
Debtor 2.

Yes. Fill out this information for  
each dependent.....

Do not state the  
dependents names.

Dependent's relationship to  
Debtor 1 or Debtor 2

Dependent's  
age

Does dependent  
live with you?

Granddaughter

3

No  
 Yes

Granddaughter

6

No  
 Yes

Grandson

10

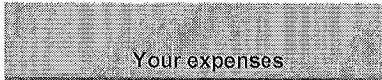
No  
 Yes

##### 3. Do your expenses include expenses of people other than yourself and your dependents?      No      Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)



##### 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 0.00

If not included in line 4:

- 4a. Real estate taxes  
4b. Property, homeowner's, or renter's insurance  
4c. Home maintenance, repair, and upkeep expenses  
4d. Homeowner's association or condominium dues  
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$ 65.00  
4b. \$ 0.00  
4c. \$ 100.00  
4d. \$ 0.00  
5. \$ 0.00

6. <b>Utilities:</b>	6a. Electricity, heat, natural gas	6a. \$ <u>190.00</u>
	6b. Water, sewer, garbage collection	6b. \$ <u>70.00</u>
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>270.00</u>
	6d. Other. Specify:	6d. \$ <u>0.00</u>
7. <b>Food and housekeeping supplies</b>	7. \$ <u>562.00</u>	
8. <b>Childcare and children's education costs</b>	8. \$ <u>0.00</u>	
9. <b>Clothing, laundry, and dry cleaning</b>	9. \$ <u>70.00</u>	
10. <b>Personal care products and services</b>	10. \$ <u>120.00</u>	
11. <b>Medical and dental expenses</b>	11. \$ <u>25.00</u>	
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>200.00</u>	
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ <u>0.00</u>	
14. <b>Charitable contributions and religious donations</b>	14. \$ <u>0.00</u>	
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$ <u>0.00</u>	
15b. Health insurance	15b. \$ <u>0.00</u>	
15c. Vehicle insurance	15c. \$ <u>0.00</u>	
15d. Other insurance. Specify:	15d. \$ <u>0.00</u>	
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16. \$ <u>0.00</u>	
17. <b>Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a. \$ <u>0.00</u>	
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>	
17c. Other. Specify:	17c. \$ <u>0.00</u>	
17d. Other. Specify:	17d. \$ <u>0.00</u>	
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. \$ <u>0.00</u>	
19. <b>Other payments you make to support others who do not live with you.</b> Specify:	\$ <u>0.00</u>	
19.		
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a. \$ <u>0.00</u>	
20b. Real estate taxes	20b. \$ <u>60.00</u>	
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>	
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>120.00</u>	
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>	
21. <b>Other:</b> Specify:	21. +\$ <u>0.00</u>	
22. <b>Calculate your monthly expenses</b>		
22a. Add lines 4 through 21.	\$ <u>1,852.00</u>	
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ <u>1,852.00</u>	
22c. Add line 22a and 22b. The result is your monthly expenses.		
23. <b>Calculate your monthly net income.</b>		
23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I.	23a. \$ <u>2,431.00</u>	
23b. Copy your monthly expenses from line 22c above.	23b. -\$ <u>1,852.00</u>	
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ <u>579.00</u>	
24. <b>Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes.	Explain here: _____	